MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

SERIAL NO. 10/607,193 | FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1		1			
2		1		1		
3		1		1		
4		1				
5	1		1			
6		2		2		
7		2		2		
8		1		1		
9		1		1		
10		1		1		
11	1		1			
12		1		1		
13		1		1		
14		1		1		
15		1		1		
16		3		3		
17		1		1		
18		1		1		
19		3		3		
20	1		1			
21		1		1		
22		1		1		
23		1		1		
24		1		1		
25		1		1		
26		1		1		
27		1		1		
28		1		1		
29	1					
30		1				
31		1				
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48						
49						
50						
TOTAL IND.	6		4			
TOTAL DEP.	35		30			
TOTAL CLAIMS	41		34			

	IND	DEP	IND	DEP	IND	DEP
51						
52						
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100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS